Combined Declaration For Patent Application and Power of Attorney							ATTORNEY DOCKET 81558/LPK			
As below named invento			•							
My residence, post office address a	nd citizenship ar	e as stated belo	w next to	my name,						
I believe I am the original, first ar	nd sole inventor	(if only one na	me is list	ed below) or an original,	first and join	nt invent	or (if plural r	ames are listed		
below) of the subject matter which	is claimed and fo	or which a pater	nt is sough	t on the invention entitled	:					
RELEASE	AGENT M	IANAGE	MENT	SYSTEM WIT	H ANIL	OX R	OLLER			
The specification of which (check of	only one item bel	ow):								
X is attached hereto.										
was filed as United States Application Serial No on, and										
was amended on (if applicable).										
was filed as PCT international application Number on and was amended under PCT Article 19 on (if applicable).										
I hereby state that I have reviewed	and understand the	he contents of t	he above-	dentified specification, in	cluding the c	laims, as	amended by	any amendment		
referred to above.	as the U.C. Deter	ut & Tuo domand	l. Office o	Il information known to m	a to ha mota	rial to na	tentability ac	defined in Title		
I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.										
		35, United State	es Code, §	119 of any foreign applica	ation(s) for p	atent or i	nventor's cer	ificate or of any		
I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any										
foreign applications(s) for patent of										
States of America filed by me on the PRIOR FOREIGN/PCT APPLIC	he same subject r	natter having a	filing date	before that of the applica	tion(s) of wh	ich prior	ity is claimed			
			027					IDSD as 1100 aven		
COUNTRY (If PCT, indicate PCT)	AF	PLICATION NUMBER		DATE OF FILING (day month year)		r	PRIORITY CLAIMED U	NO NO		
None					· ·		YES			
								NO		
			_				YES	NO		
I hereby claim the benefit under Ti	tle 35, United Sta	ates Code, 119	§(e) of an	y United States provisiona	al application	ı(s) listed	l below:			
PRIOR PROVISIONAL APPLIC		ANY PRIOR	ITY CLA	IMS UNDER 35 U.S.C.						
PROVISIONAL APPLICATION NUMBER 60/420,047				October 21, 2002						
00/420,047				OCTOBER 21, 2002						
I hereby claim the benefit under designating the United States of A in that/those prior applications(s) Trademark Office all information available between the filing date o	merica that is/are in the manner pro known to me to f the prior applic	e listed below a povided by the fi be material to ation(s) and the	nd, insofa irst paragr patentabi national	r as the subject matter of eaph of Title 35, §112, I aclity as defined in Title 37, or PCT international filing	each of the cleknowledge to Code of Fe	laims of the duty the deral Repair application	this application disclose to gulations §1.5	on is not disclosed the U.S. Patent &		
35USC§120: U.S. APPLICATIONS					STATUS (Check one)					
U.S. APPLICATION NUMBER		U.S. FILING DATE			PATENT	<u>-</u>	PENDING	ABANDONED		
None										
PCT APPLICATIONS DESIGNATING THE U.S.						\top				
PCT APPLICATION NO.	PCT FILING DATE			U.S. SERIAL NUMBERS ASSIGNED (if any)						
None										
					l	L				

ATTORNEY DOCKET Combined Declarati n For Pat nt Applicati n and Power of Att rney (C ntinued) 81558/LPK POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith (List name and registration number) Lawrence P. Kessler, Registration No. 24,637 James D. Leimbach, Registration No. 34,374 Direct Telephone Calls to: Send Correspondence to: (name and telephone number) Lawrence P. Kessler NexPress Solutions LLC Lawrence P. Kessler Patent Department TEL: (585) 253-0123 1447 St. Paul Street FAX: (585) 726-0894 Rochester, NY 14653-7103 SECOND GIVEN NAME FAMILY NAME FIRST GIVEN NAME Schlien Ruediger STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITY 0 New York Germany Pittsford STATE & ZIP CODE (COUNTRY) BUSINESS ADDRESS BUSINESS NexPress Solutions LLC New York 14653-7103 (U.S.A.) 1447 St. Paul Street Rochester SECOND GIVEN NAME FAMILY NAME FIRST GIVEN NAME FULL NAME OF COUNTRY OF CITIZENSHIP STATE OR FOREIGN COUNTRY 0 STATE & ZIP CODE (COUNTRY) BUSINESS ADDRESS 2 SECOND GIVEN NAME FIRST GIVEN NAME FAMILY NAME FULL NAME OF 2 STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP CITY RESIDENCE & CITIZENSHIP 0 STATE & ZIP CODE (COUNTRY) **BUSINESS ADDRESS** BUSINESS ADDRESS I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE, OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203			
thinky! Sell					
DATE	DATE	DATE			
12/03/2002					